

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: MCDONNELL DOUGLAS CORP TRACT II
ATTN: ENVIRONMENTAL MANAGER
MCDONNELL BLVD & AIRPORT RD
EPA ID NO: BERKELEY, MO 63134
EPA ID: MOD000818906 MO ID: 001248



U.S. ENVIRONMENTAL
PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
IC

IDENTIFICATION AND
CERTIFICATION

HAZARDOUS WASTE PROGRAM
MISSOURI DEPARTMENT OF
NATURAL RESOURCES

Instructions: Please see the detailed instructions beginning on page 7 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each section is provided below.

Sec. I Site name and location address. Check the box ☐ in items A, B, C, E, F, G, and H if same as label; if different, enter corrections. If label absent, enter information. Instructions page 7.

A. EPA ID No. Same as label <input checked="" type="checkbox"/> or →		B. County Same as label <input type="checkbox"/> or → St. Louis County	
C. Site/company name Same as label <input checked="" type="checkbox"/> or →		D. Has the site name associated with this EPA ID changed since 1995? <input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No	
E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description. Same as label <input checked="" type="checkbox"/> or →			
F. City, town, village Same as label <input checked="" type="checkbox"/> or →		G. State Same as label <input checked="" type="checkbox"/> or →	H. Zip Code Same as label <input checked="" type="checkbox"/> or →

Sec. II Mailing address of site. Instructions page 7.

A. Is the mailing address the same as the location address? <input type="checkbox"/> 1 Yes (SKIP TO SEC. III) <input checked="" type="checkbox"/> 2 No (CONTINUE TO BOX B)		
B. Number and street name of mailing address P.O. Box 516 Mailcode S111-1099		
C. City, town, village St. Louis	D. State MO	E. Zip Code 63166-0516

Sec. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instructions page 7.

A. Last Name Haake	First name Joseph	M.I. W.	B. Title Group Manager Environmental Engineering	C. Telephone Number 314-232-3319 Extension
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Sec. IV "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3006 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations." Instructions page 8.

A. Last Name Kury	First name Bryan	M.I. E.	B. Title Manager, Environmental and Hazardous Materials Services
C. Signature <i>Bryan E. Kury</i>			D. Date of signature 03 25 98 Month Day Year



R00115643

RCRA RECORDS CENTER

BRS data entered

BY EB Tri-Cov

ON 7/28/98

QCD 10/16/98
CF

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: **McDonnell Douglas Corp. Tract II**
McDonnell Blvd. & Airport Rd.
Berkeley, MO 63134

EPA ID NO: **M 0 D 0 0 0 8 1 8 9 0 6**

U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) Contaminated solid waste from aircraft cleaning and painting operations				
	B. EPA hazardous waste code (page 12) D 0 0 7 F 0 0 2 F 0 0 3 F 0 0 5 N A		C. State hazardous waste code (page 13) _____		
D. SIC code (page 13) 3 7 2 1	E. Origin code (page 13) 1 System Type M N A	F. Source code (page 14) A 2 1	G. Point of measurement (p. 14) 4	H. Form code (page 14) B 3 1 9	I. RCRA-radioactive mixed (page 14) 2
Sec. II	A. Quantity generated in 1997 (page 15) 9 0 2 4 0 0		B. UOM (page 15) 1 Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
	ON-SITE PROCESS SYSTEM 1 On-site process system type (page 16) M		ON-SITE PROCESS SYSTEM 2 On-site process system type (page 16) M		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____
Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
	Site 1	B. EPA ID No. of facility waste was shipped to (page 17) T X D 0 5 5 1 4 1 3 7 8	C. System type shipped to (p. 17) M 0 4 3	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) 7 0 2 4 0 0
	Site 2	B. EPA ID No. of facility waste was shipped to (page 17) K S D 9 8 1 5 0 6 0 2 5	C. System type shipped to (p. 17) M 0 4 3	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) 2 0 0 0 0 0
	Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) _____

Comments:

Section I.H. - debris containing paint, B406, B407 solvent wipes,
B409 solvent wipes

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Spent halogenated solvent from cleaning operations			
B. EPA hazardous waste code (page 12) <u>F 0 0 2</u> <u>D 0 4 0</u> <u>N A</u> <u>N A</u> <u>N A</u>		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 1 9</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 2 0 3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u>2 9 1 5</u> <u>0</u>			
B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) <u>M</u>	
Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 0 6</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) <u>2 9 1 5</u> <u>0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____	
Comments:					

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McDonnell Blvd. & Airport Rd.
Berkeley, MO 63134

EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6U.S. ENVIRONMENTAL
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GMWASTE GENERATION
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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Spent halogenated solvent from degreasing operations			
B. EPA hazardous waste code (page 12) <u>F 0 0 1</u> <u>D 0 4 0</u> <u>NA</u> <u>NA</u> <u>NA</u>		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>MA</u>	F. Source code (page 14) <u>A 1 9</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 2 0 2</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u>1 5 6 6</u> <u>0</u>			
B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) <u>M</u>	
Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 6 3</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) <u>1 5 6 6</u> <u>0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u>NA</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u>NA</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____	

Comments:

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SITE NAME: **McDonnell Douglas Corp. Tract II**
McDonnell Blvd. & Airport Rd.
Berkeley, MO 63134

EPA ID NO: **M 0 D 0 0 0 8 1 8 9 0 6**

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) Spent non-halogenated solvent from cleaning and painting operations				
B. EPA hazardous waste code (page 12) D 0 0 8 D 0 3 5 D 0 4 0			C. State hazardous waste code (page 13) _____		
D. SIC code (page 13) 3 7 2 1	E. Origin code (page 13) 1 System Type M N A	F. Source code (page 14) A 0 4	G. Point of measurement (p. 14) 2	H. Form code (page 14) B 2 0 3	I. RCRA-radioactive mixed (page 14) 2
Sec. II	A. Quantity generated in 1997 (page 15) 1 8 9 6 1 5 8 0		B. UOM (page 15) 1 Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) M 0 2 1		Quantity treated, disposed, or recycled on site in 1997 (page 16) 2 9 7 9 0		On-site process system type (page 16) M N A	
Quantity treated, disposed, or recycled on site in 1997 (page 16) _____					
Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) M 0 D 0 0 0 8 1 8 9 0 6	C. System type shipped to (p. 17) M 1 4 1	D. Off-site availability code (page 17) 2	E. Total quantity shipped in 1997 (page 17) 1 8 8 6 7 9 0	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____ N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) _____	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) _____	
Comments: Section I.B. - F003, F005 Section I.F. - A19 Section I.H. - B209, B211					

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Sec. I		A. Waste description (page 12) Spent halogenated and non-halogenated solvent mixture from cleaning and painting operations				
B. EPA hazardous waste code (page 12)		D 1 0 1 0 1 1		D 1 0 1 0 1 7		C. State hazardous waste code (page 13)
		D 1 0 3 5		D 1 0 4 0		F 0 0 2
D. SIC code (page 13)	E. Origin code (page 13)	F. Source code (page 14)	G. Point of measurement (p. 14)	H. Form code (page 14)	I. RCRA-radioactive mixed (page 14)	
3 7 2 1	1 System Type M N A	A 1 9	2	B 2 0 4	2	

Sec. II		A. Quantity generated in 1997 (page 15)		B. UOM (page 15)		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)	
		2 3 2 6 2 0		1 Density 1 lbs/gal 2 sg		<input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)	
ON-SITE PROCESS SYSTEM 1				ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16)		Quantity treated, disposed, or recycled on site in 1997 (page 16)		On-site process system type (page 16)		Quantity treated, disposed, or recycle on site in 1997 (page 16)	
M				M			

Sec. III				
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
	M 0 D 0 0 0 8 1 8 9 6 3	M 1 4 1	2	2 3 2 6 2 0
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
	N A	M		
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
	N A	M		

Comments:

Section I.B. - F003, F005

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Sec. I	A. Waste description (page 12) Waste oil contaminated with halogenated and non-halogenated solvents				
	B. EPA hazardous waste code (page 12) <u>F 0 0 2</u> <u>F 0 0 5</u> <u>N A</u> <u>N A</u> <u>N A</u>		C. State hazardous waste code (page 13) <u> </u>		
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 5 4</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 2 0 6</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II	A. Quantity generated in 1997 (page 15) <u> 2 8 7 5 7 . 0</u>		B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
	ON-SITE PROCESS SYSTEM 1 On-site process system type (page 16) <u>M</u> Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		ON-SITE PROCESS SYSTEM 2 On-site process system type (page 16) <u>M</u> Quantity treated, disposed, or recycle on site in 1997 (page 16) <u> </u>		
Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
	Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 0 6</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) <u> 2 8 7 5 7 . 0</u>
	Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>
	Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>

Comments:

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Spent ferric chloride from etching metal parts			
B. EPA hazardous waste code (page 12) <u>D 0 0 2</u> <u>D 0 0 7</u> <u>D 0 0 8</u> <u>D 0 0 9</u> <u>N A</u>		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 2 7</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 1 0 3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u>1 1 0 0 4 0 0 0</u>			
B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) <u>M</u>	
		Quantity treated, disposed, or recycle on site in 1997 (page 16) _____			
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>T N D</u> <u>0 9 3</u> <u>2 1 9</u> <u>0 1 2</u>	C. System type shipped to (p. 17) <u>M 0 7 1 1</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) <u>1 0 0 4 0 0 0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1997 (page 17) _____	
Comments:					

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) Spent nitric and hydrofluoric acid from pickling aluminum and titanium parts				
	B. EPA hazardous waste code (page 12) <u>D 0 0 2</u> <u>D 0 0 7</u> <u>N A</u> <u>N A</u> <u>N A</u>		C. State hazardous waste code (page 13) <u> </u>		
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 2 6</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 1 0 3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II	A. Quantity generated in 1997 (page 15) <u> 1 4 3 2 6 0 </u>		B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
	ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		On-site process system type (page 16) <u>M</u>	
Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>	
Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
	Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>I N D 0 9 3 2 1 9 0 1 2</u>	C. System type shipped to (p. 17) <u>M 0 7 1</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) <u> 1 4 3 2 6 0 </u>
	Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>
	Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: McDonnell Douglas Corp. Tract II
McDonnell Blvd. & Airport Rd.
Berkeley, MO 63134

EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6U.S. ENVIRONMENTAL
PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Spent nitric and chromic acid from oxide removal on metal surfaces			
B. EPA hazardous waste code (page 12) D 0 0 8 D 0 0 7 D 0 0 8 N A N A		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) 3 7 2 1	E. Origin code (page 13) 1 System Type M N A	F. Source code (page 14) A 2 9	G. Point of measurement (p. 14) 2	H. Form code (page 14) B 1 0 3	I. RCRA-radioactive mixed (page 14) 2
Sec. II		A. Quantity generated in 1997 (page 15) _____ 2 5 4 9 0 _____ 0			
B. UOM (page 15) 1 Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) M _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) M _____	
Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) M I D 0 9 8 0 1 1 9 9 2	C. System type shipped to (p. 17) M 0 7 1	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) _____ 2 3 0 0 0 _____ 0	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) M O D 0 0 0 8 1 8 9 6 3	C. System type shipped to (p. 17) M 1 4 1	D. Off-site availability code (page 17) 2	E. Total quantity shipped in 1997 (page 17) _____ 2 4 9 0 _____ 0	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ N A	C. System type shipped to (p. 17) M _____	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) _____	

Comments:

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I					
A. Waste description (page 12) Spent chromic acid with ferricyanide from chemical conversion coating operations					
B. EPA hazardous waste code (page 12) <u>D 0 0 2</u> <u>D 0 0 5</u> <u>D 0 0 7</u> <u>NA</u> <u>NA</u>			C. State hazardous waste code (page 13) _____		
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M NA</u>	F. Source code (page 14) <u>A 2 9</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 1 0 3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>

Sec. II	
A. Quantity generated in 1997 (page 15) <u>1 2 7 4 6 4</u> <u>10</u>	B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg
C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)	
ON-SITE PROCESS SYSTEM 1	
On-site process system type (page 16) <u>M</u>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____
ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <u>M</u>	Quantity treated, disposed, or recycled on site in 1997 (page 16) _____

Sec. III				
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M I D 0 9 8 0 1 1 9 9 2</u>	C. System type shipped to (p. 17) <u>M 10 17 12</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) <u>1 2 12 12 12 10</u> <u>10</u>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 6 3</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) <u>5 2 4 4</u> <u>10</u>
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>NA</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____

Comments:

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

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1997 Hazardous Waste Report

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GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Acid sludge from various process tanks	
B. EPA hazardous waste code (page 12) <u>D 0 0 2</u> <u>N A</u>		C. State hazardous waste code (page 13) <u> </u>	
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 6 0</u>	G. Point of measurement (p. 14) <u>2</u>
		H. Form code (page 14) <u>B 5 1 9</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u> 7 2 6 0 0</u>	
		B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	
		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)	
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <u>M </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>	
		On-site process system type (page 16) <u>M </u>	
		Quantity treated, disposed, or recycle on site in 1997 (page 16) <u> </u>	
Sec. III			
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 6 3</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>
			E. Total quantity shipped in 1997 (page 17) <u> 7 2 6 0 0</u>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M </u>	D. Off-site availability code (page 17) <u> </u>
			E. Total quantity shipped in 1997 (page 17) <u> </u>
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M </u>	D. Off-site availability code (page 17) <u> </u>
			E. Total quantity shipped in 1997 (page 17) <u> </u>
Comments:			

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6



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1997 Hazardous Waste Report

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Spent sulfuric acid from hard coating operations			
B. EPA hazardous waste code (page 12) D 0 0 2 N A		C. State hazardous waste code (page 13) 			
D. SIC code (page 13) 3 7 2 1	E. Origin code (page 13) 1 System Type M N A	F. Source code (page 14) A 2 2	G. Point of measurement (p. 14) 2	H. Form code (page 14) B 1 0 3	I. RCRA-radioactive mixed (page 14) 2
Sec. II		A. Quantity generated in 1997 (page 15) 2 8 2 . 0			
B. UOM (page 15) 1 Density . <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16) M		Quantity treated, disposed, or recycled on site in 1997 (page 16) 		On-site process system type (page 16) M	
Quantity treated, disposed, or recycled on site in 1997 (page 16) 		Quantity treated, disposed, or recycled on site in 1997 (page 16) 		Quantity treated, disposed, or recycled on site in 1997 (page 16) 	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) M 0 D 0 0 0 8 1 8 9 0 6	C. System type shipped to (p. 17) M 1 1 4 1 1	D. Off-site availability code (page 17) 2	E. Total quantity shipped in 1997 (page 17) 2 8 2 . 0	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 	
Comments:					

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Berkeley, MO 63134

EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

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GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Spent hydrochloric acid from stainless steel pickling			
B. EPA hazardous waste code (page 12) <u>D 0 0 7</u> <u>D 0 0 8</u> <u>NA</u>		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>MA</u>	F. Source code (page 14) <u>A 2 6</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 1 0 3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) _____ <u>5 1 9</u> <u>0</u>			
B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) <u>M</u>	
Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 6 3</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) _____ <u>5 1 9</u> <u>0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>NA</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>NA</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____	
Comments:					

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) Spent sodium hydroxide from derusting of metal parts				
B. EPA hazardous waste code (page 12) <u>D 0 0 2</u> <u>N A</u> <u>N A</u> <u>N A</u> <u>N A</u>			C. State hazardous waste code (page 13) <u> </u>		
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 2 9</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 1 0 6</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II	A. Quantity generated in 1997 (page 15) <u> 2 2 8 6 0 0 </u>		B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>	On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>
Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>T I N D 0 9 3 2 1 9 0 1 2</u>	C. System type shipped to (p. 17) <u>M 0 7 9</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) <u> 2 2 8 6 0 0 </u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Comments:					

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 SITE NAME: McDonnell Blvd. & Airport Rd.
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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6



U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Spent sulfuric acid from aluminum surface cleaning			
B. EPA hazardous waste code (page 12) D 0 0 2 N A		C. State hazardous waste code (page 13) 			
D. SIC code (page 13) 3 7 2 1	E. Origin code (page 13) 1 System Type M N A	F. Source code (page 14) A 0 2	G. Point of measurement (p. 14) 2	H. Form code (page 14) B 1 0 3	I. RCRA-radioactive mixed (page 14) 2
Sec. II		A. Quantity generated in 1997 (page 15) 1 4 5 8 . 0			
B. UOM (page 15) 1 Density . <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16) M		Quantity treated, disposed, or recycled on site in 1997 (page 16) 		On-site process system type (page 16) M	
Quantity treated, disposed, or recycled on site in 1997 (page 16) 		Quantity treated, disposed, or recycled on site in 1997 (page 16) 		Quantity treated, disposed, or recycled on site in 1997 (page 16) 	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) M 0 D 0 0 0 8 1 8 9 6 3	C. System type shipped to (p. 17) M 1 4 1	D. Off-site availability code (page 17) 2	E. Total quantity shipped in 1997 (page 17) 1 4 5 8 . 0	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 	

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6U.S. ENVIRONMENTAL
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FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12) Spent acetic acid solution from anodizing of aluminum					
B. EPA hazardous waste code (page 12) <u>D 0 0 2</u> <u>D 0 0 4</u> <u>D 0 0 7</u> <u>N A</u> <u>N A</u>		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 2 9</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 1 0 3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II A. Quantity generated in 1997 (page 15) _____ <u>18 13 10</u> <u>10</u>		B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)	
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) <u>M</u>	
		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____			

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 0 6 3</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) _____ <u>18 13 10</u> <u>10</u>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____

Comments:

Section I.F. - anodizing

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Berkeley, MO 63134

EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6



**U.S. ENVIRONMENTAL
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1997 Hazardous Waste Report

FORM
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WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 2) Small quantities of laboratory chemicals, expired-shelf-life, and off-specification products	
B. EPA hazardous waste code (page 12) <u>D1001</u> <u>D011</u> <u>D1026</u> <u>P1030</u> <u>NA</u>	
C. State hazardous waste code (page 13) <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>	
D. SIC code (page 13) <u>3</u> <u>7</u> <u>2</u> <u>1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M</u> <u>N</u> <u>A</u>
F. Source code (page 14) - <u>A</u> <u>5</u> <u>7</u>	G. Point of measurement (p. 14) <u>1</u>
H. Form code (page 14) <u>B</u> <u>2</u> <u>0</u> <u>3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>

Sec. II	A. Quantity generated in 1997 (page 15) [][][][][][] [3] [8] [0] . [0]	B. UOM [1] (page 15) Density [][] . [][] <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
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ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1997 (page 16)	On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1997 (page 16)
[M] [] [] []	[] [] [] [] [] [] [] [] . []	[M] [] [] []	[] [] [] [] [] [] [] [] . []

Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) T X D 0 5 5 1 4 1 3 7 8	C. System type shipped to (p. 17) M 0 4 3	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) 3 8 0 . 0
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) .
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) N A	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) .

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

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McDonnell Blvd. & Airport Rd.
Berkeley, MO 63134

EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Small quantities of laboratory chemicals, expired-shelf-life, and off-specification products			
B. EPA hazardous waste code (page 12) <u>L A B P</u> <u>NA</u> <u>NA</u> <u>NA</u> <u>NA</u>		C. State hazardous waste code (page 13) <u> </u>			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M NA</u>	F. Source code (page 14) <u>5 7</u>	G. Point of measurement (p. 14) <u>1</u>	H. Form code (page 14) <u>0 0 3</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u> 3 1 0 1 . 0</u>			
B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		On-site process system type (page 16) <u>M</u>	
Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>T X D 0 5 5 1 4 1 3 7 8</u>	C. System type shipped to (p. 17) <u>M 0 4 3</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) <u> 3 1 0 1 . 0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> NA</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> NA</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Comments:					

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Berkeley, MO 63134

EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) Spent nickel cadmium batteries				
B. EPA hazardous waste code (page 12) <u>D 0 0 6</u> <u>N A</u>			C. State hazardous waste code (page 13) <u> </u>		
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 5 5</u>	G. Point of measurement (p. 14) <u>1</u>	H. Form code (page 14) <u>B 3 0 9</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II	A. Quantity generated in 1997 (page 15) <u> 1 0</u>		B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>	On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>
Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>T N D 9 8 1 9 2 0 1 1 9</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) <u> 1 0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Comments:					

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6



U.S. ENVIRONMENTAL PROTECTION AGENCY

1997 Hazardous Waste Report

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Mercury-containing material			
B. EPA hazardous waste code (page 12) D 0 0 9 N A		C. State hazardous waste code (page 13) 			
D. SIC code (page 13) 3 7 2 1	E. Origin code (page 13) 1 System Type M N A	F. Source code (page 14) A 5 6	G. Point of measurement (p. 14) 2	H. Form code (page 14) B 3 1 9	I. RCRA-radioactive mixed (page 14) 2
Sec. II		A. Quantity generated in 1997 (page 15) 		B. UOM (page 15) 1 Density 	
		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16) M		Quantity treated, disposed, or recycled on site in 1997 (page 16) 		On-site process system type (page 16) M	
		Quantity treated, disposed, or recycled on site in 1997 (page 16) 		On-site process system type (page 16) 	

Sec. III		A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) T N D 9 8 1 9 2 0 1 1 9	C. System type shipped to (p. 17) M 1 4 1	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) 	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) 	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) 	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 	

Comments:

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Sec. I		A. Waste description (page 12) Ammonia solution from tinting of aircraft canopies			
B. EPA hazardous waste code (page 12) <u>D 0 1 1</u> <u>N A</u>		C. State hazardous waste code (page 13) <u> </u>			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 2 1 9</u>	G. Point of measurement (p. 14) <u>2</u>	H. Form code (page 14) <u>B 1 1 0 1 6</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u> 5 0 2 9</u> <u>0</u>			
B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		On-site process system type (page 16) <u>M</u>	
Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>	
Sec. III		A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 6 3</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) <u> 5 0 2 9</u> <u>0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Comments: Section I.F. - tinting of canopy glass					

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Waste sodium persulfate			
B. EPA hazardous waste code (page 12) <u>D 0 0 2</u> <u>N A</u>		C. State hazardous waste code (page 13) <u> </u>			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>M N A</u>	F. Source code (page 14) <u>A 5 7</u>	G. Point of measurement (p. 14) <u>1</u>	H. Form code (page 14) <u>B 1 1 0</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u> 9 0</u> <u>0</u>			
B. UOM (page 15) <u>1</u> Density <u> </u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		On-site process system type (page 16) <u>M</u>	
Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>		Quantity treated, disposed, or recycled on site in 1997 (page 16) <u> </u>	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M 0 D 0 0 0 8 1 8 9 6 3</u>	C. System type shipped to (p. 17) <u>M 1 4 1</u>	D. Off-site availability code (page 17) <u>2</u>	E. Total quantity shipped in 1997 (page 17) <u> 9 0</u> <u>0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> N A</u>	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1997 (page 17) <u> </u>	
Comments:					

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EPA ID NO: M 0 D 0 0 0 8 1 8 9 0 6

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I		A. Waste description (page 12) Fluorescent lamps containing mercury			
B. EPA hazardous waste code (page 12) <u>D 0 0 9</u> <u>NA</u>		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) <u>3 7 2 1</u>	E. Origin code (page 13) <u>1</u> System Type <u>NA</u>	F. Source code (page 14) <u>A 9 9</u>	G. Point of measurement (p. 14) <u>1</u>	H. Form code (page 14) <u>B 3 1 9</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II		A. Quantity generated in 1997 (page 15) <u>2 7 0 8 3</u> . <u>0</u>			
B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type (page 16) <u>M</u> _____		Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		On-site process system type (page 16) <u>M</u> _____	
Quantity treated, disposed, or recycled on site in 1997 (page 16) _____		Quantity treated, disposed, or recycle on site in 1997 (page 16) _____		Quantity treated, disposed, or recycle on site in 1997 (page 16) _____	
Sec. III					
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>W T D 0 7 1 1 6 4 0 3 2</u>	C. System type shipped to (p. 17) <u>M 0 1 1 2</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) <u>2 7 0 8 3</u> . <u>0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>NA</u>	C. System type shipped to (p. 17) <u>M</u> _____	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____ <u>NA</u>	C. System type shipped to (p. 17) <u>M</u> _____	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1997 (page 17) _____	
Comments:					